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Application Number: 09/756,052

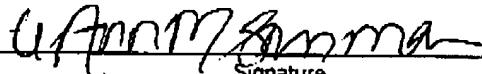
Filing Date: 1/5/2001

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1. Fee Transmittal
2. Request for Continued Examination (RCE) Transmittal
3. Response to Office Action Dated 8/15/2005

Total Pages Transmitted: 22  
571-273-8300  
MS1-711US

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PTO/SB/17 (12-04)

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Effective on 12/09/2004.

Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4816).

# FEES TRANSMITTAL

## For FY 2005

 Applicant claims small entity status. See 37 CFR 1.27

TOTAL AMOUNT OF PAYMENT (\$ 790.00)

Complete if Known

CENTRAL FAX CENTER

Application Number 09/758,052

Filing Date 1/5/2001

First Named Inventor Jun Liu et al.

Examiner Name GWEN LIANG

Art Unit 2172

Attorney Docket No. MS1 - 711US

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## METHOD OF PAYMENT (check all that apply)

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## FEE CALCULATION

## 1. BASIC FILING, SEARCH, AND EXAMINATION FEES

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

## 2. EXCESS CLAIM FEES

## Fee Description

Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent

50 25

Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent

200 100

Multiple dependent claims

360 180

## Total Claims

Extra Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims	Fee (\$)	Fee Paid (\$)
- 20 or HP =	x 50	=			

HP = highest number of total claims paid for, if greater than 20

## Indep. Claims

Extra Claims	Fee (\$)	Fee Paid (\$)		
- 3 or HP =	x 200	=		

HP = highest number of independent claims paid for, if greater than 3

## 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100 =	/ 50 =	(round up to a whole number) x		

## 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other: Request for Continued Examination (RCE) Transmittal

Fee Paid (\$)

790.00

## SUBMITTED BY

Signature	Brian Hart	Registration No. 44421 (Attorney/Agent)	Telephone (509) 324-9256
Name (Print/Type)	Brian G. Hart	Date 11/15/2005	

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